

RECEIVED
CENTRAL FAX CENTER

NOV 28 2005

RatnerPrestia
WE SPECIALIZE IN THE LAW OF CREATIVITY®

Suite 301, One Westlakes, Berwyn
P.O. Box 980
Valley Forge, PA 19482-0980
Phone: 610-407-0700
Fax: 610-407-0701

Nemours Building
1007 Orange Street, Suite 1100
P.O. Box 1596
Wilmington, DE 19899
Phone: 302-778-2500
Fax: 302-778-2600
www.ratnerprestia.com

Suite 265
Commerce Corporate Center
5100 Tilghman Street
Allentown, PA 18104
Phone: 610-530-8100
Fax: 610-530-8200

DATE: 11/28/05 TIME: _____

TO:	USPTO	FAX NO.:	571-273-8300
FROM:	Kenneth N. Nigon	ADMIN. ASST.:	Patricia C. Boccella
APPLN. NO.:	10/067,563	ATTY. DOCKET NO.:	MATI-210US
TITLE OF APPLN.: TABLE DRIVEN METHOD FOR CALCULATING ARITHMETIC INVERSE FOR USE IN CRYPTOGRAPHY			
FILING DATE:	2/5/02	ART UNIT:	2134
FIRST INVENTOR:	Gregory M. Perkins	CONF. NO.:	5068
TITLE OF DOCUMENT (and List of Attachments): Amendment; Transmittal, Fee Trans; PTO2038			

Total Number of Pages: 21 (including this form)

COMMENTS

**CONFIDENTIAL AND PRIVILEGED ATTORNEY/CLIENT INFORMATION**

This facsimile transmission (and/or documents accompanying it) may contain attorney/client privileged communications and confidential business information that is intended for use only by the individual or company to whom it is addressed. Disclosure, interception, copying or any other use of this transmission by anyone other than any intended recipient is prohibited. If you receive this transmission by mistake, please notify the sender.

Please notify us immediately if you have not received the number of pages indicated above.

TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>		Application Number	10/087,563
		Filing Date	February 5, 2002
		First Named Inventor	Gregory M. Perkins
		Art Unit	2134
		Examiner Name	Thomas M. Szymanski
Total Number of Pages in This Submission 17		Attorney Docket No.	MATH-210US

NOV 28 2005

RECEIVED
CENTRAL FAX CENTER

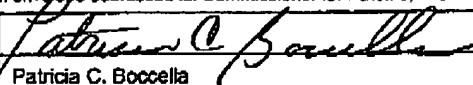
ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/Declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD. Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Return Receipt Post Card
Remarks:		

SIGNATURE OF APPLICANT, ATTORNEY OR AGENT

Firm Name	RatnerPrestia		
Signature			
Printed Name	Kenneth N. Nigon		
Date	November 28, 2005	Registration No.	31,549

CERTIFICATE OF TRANSMISSION / MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

Signature			
Typed or Printed Name	Patricia C. Boccella	Date	November 28, 2005

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Office, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, ALEXANDRIA, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Effective on 12/08/04.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL For FY 2005

 Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 600.00)

Complete if Known

Application Number 10/087,583

RECEIVED

Filing Date February 5, 2002

CENTRAL FAX CENTER

First Named Inventor Gregory M. Perkins

NOV 28 2005

Examiner Name Thomas M. Szymanski

Art Unit 2134

Attorney Docket No. MATI-210US2

METHOD OF PAYMENT (check all that apply)
 Check Credit Card Money Order None Other (please identify): _____

 Deposit Account Deposit Account Number: 18-0350 Deposit Account Name: RatnerPrestia

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

<input type="checkbox"/> Charge fee(s) indicated below	<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17	<input checked="" type="checkbox"/> Credit any overpayments

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-203A.

FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES	
	Small Entity	Fee (\$)	Small Entity	Fee (\$)	Small Entity	Fee (\$)
Utility	300	150	500	250	200	100
Design	200	100	100	50	130	65
Plant	200	100	300	150	160	80
Reissue	300	150	500	250	600	300
Provisional	200	100	0	0	0	0

2. EXCESS CLAIM FEES**Fee Description**

Each claim over 20 (including Reissues)

Small Entity	
Fee (\$)	Fee (\$)
50	25
200	100
360	180

Each independent claim over 3 (including Reissues)

Multiple dependent claims

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims	
				Fee (\$)	Fee Paid (\$)
- 20 or HP =					
HP = highest number of total claims paid for, if greater than 20					

Indep. Claims Extra Claims Fee (\$) Fee Paid (\$)

6 - 3 or HP = 3 x 200 = 600

HP = highest number of independent claims paid for, if greater than 3

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(c)), the application size fee due is \$250 (\$125 for small entity) for each 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)

- 100 = / 50 = (round up to a whole number) x =

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): _____

Fee Paid (\$)

SUBMITTED BY		Complete if applicable		
Signature		Registration No. Attorney/Agent	31,549	Telephone 610-407-0700
Name (Print/Type)	Kenneth N. Nigon			Date November 28, 2005

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 (1-800-786-9199) and select option 2.

Effective on 12/08/04.
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEET TRANSMITTAL For FY 2005

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 600.00)

Complete if Known	
Application Number	10/087,583
Filing Date	February 5, 2002
First Named Inventor	Gregory M. Perkins
Examiner Name	Thomas M. Szymanski
Art Unit	2134

RECEIVED

CENTRAL FAX CENTER

NOV 28 2005

METHOD OF PAYMENT (check all that apply)

Check Credit Card Money Order None Other (please identify):

Deposit Account Deposit Account Number: 18-0350 Deposit Account Name: RatnerPrestia

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

<input type="checkbox"/> Charge fee(s) indicated below	<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17	<input checked="" type="checkbox"/> Credit any overpayments

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES	
	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)
Utility	300	150	500	250	200	100
Design	200	100	100	50	130	65
Plant	200	100	300	150	160	80
Reissue	300	150	500	250	600	300
Provisional	200	100	0	0	0	0

2. EXCESS CLAIM FEES

Fee Description

Each claim over 20 (including Reissues)

Small Entity

Fee (\$)

Fee (\$)

50 25

Each independent claim over 3 (including Reissues)

200 100

Multiple dependent claims

360 180

Total Claims	Extra Claims		Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims	
	Fee (\$)	Fee (\$)			Fee (\$)	Fee (\$)
- 20 or HP =			x	=		

HP = highest number of total claims paid for, if greater than 20

Indep. Claims

Extra Claims Fee (\$)

6 - 3 or HP = 3 x 200 = 600

HP = highest number of independent claims paid for, if greater than 3

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$)

- 100 = / 50 = (round up to a whole number) x =

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge):

Fees Paid (\$)

Complete if applicable				
Submitted By	Signature	Registration No. Attorney/Agent	31,549	Telephone
			610-407-0700	
Name (Print/Type)	Kenneth N. Nigon		Date	November 28, 2005

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 (1-800-786-9199) and select option 2.

11-28-2005 03:37PM FROM-RatnerPrestia

6104070701

T-044 P.006/021 F-412

Appln. No.: 10/067,563
Amendment Dated November 28, 2005
Response to Office Action of August 26, 2005

MATI-210US

**RECEIVED
CENTRAL FAX CENTER**

NOV 28 2005

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appln. No: 10/067,563
Applicant: Gregory M. Perkins
Filed: February 5, 2002
Title: TABLE DRIVEN METHOD FOR CALCULATING ARITHMETIC INVERSE FOR USE
IN CRYPTOGRAPHY
TC/A.U.: 2134
Examiner: Thomas M. Szymanski
Confirmation No.: 5068
Docket No.: MATI-210US

AMENDMENT

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Responsive to the Office Action dated August 26, 2005, please amend the
above-identified application as follows:

- Amendments to the Specification** begin on page _____ of this paper.
- Amendments to the Claims** are reflected in the listing of claims which
begins on page 2 of this paper.
- Amendments to the Drawings** begin on page _____ of this paper and
include an attached replacement sheet(s).
- Remarks/Arguments** begin on page 12 of this paper.

11/29/2005 TL0111 00000064 10067563
01 FC:1201 600.00 OP